

CITY OF GROVE CITY

4035 Broadway Grove City, Ohio 43123 (614) 277-3000 Fax (614) 277-3011 www.ci.grove-city.oh.us LOT SPLIT APPLICATION FEE \$50.00

Date Submitted Oct 7, 2016

PROJECT INFORMATION	
PROJECT NAME Marlane Retail	Development
PROPERTY LOCATION Marlane Drive at 3	
PARCEL TAX ID#	15445,040015446
EXISTING ZONING C-2	
PROPERTY OWNER ('S) KRRISH LOOKS.	unley, Lic
DAYTIME TELEPHONE FAX NUMBER	1.1 Road 61101 C. 1401 43123
DAYTIME TELEPHONE FAX NUMBER () () ()	
APPLICANT/AGENT	
NAME OF APPLICANT GOOD GOOD HIES.	Inc
MAILING ADDRESS 3331 E LIVING 5 St	on Avenue Columbus, Oh 43227
DAYTIME TELEPHONE FAX NUMBER () 614 231 2016 () 614 2	E-MAIL 312018 BAYTIME TELEPHONE AL () (2019)
DESIGNATED CONTACT PERSON	DAYTIME TELEPHONE PE () (5 977 c)
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I /2012001/ d- hJe: +720 6	OF, the applicant or the applicant's duly authorized agent) have
I, Grange W. Schweitzer PE., the applicant or the applicant's duly authorized agent have read and understand the contents of this submittal. The information contained, including attached exhibits, is complete and true/correct, to the best of my knowledge. This request conforms to the requirements of Section 1135.08.	
Site visits to the property may be necessary by City representatives. The Owner/Applicant hereby authorizes representatives to visit and/or photograph the property described in this application.	
Signature of Applicant Sugar Mul	Mr. P.E. Date 10-06-16
Signature of Owner	Date \0/06/16
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FOR OFFICE USE ONLY	CECEIVED/AMOUNT CHECK NUMBER
	CEEVED/AMOUNT CHECK NUMBER / 1/22 DATE SCHEDULED FOR PLANNING COMMISSION
RECEIVED BY	
PROJECT ID# 201610070072	PLANNING COMMISSION ACTION APPROVED DISAPPROVED